

Approved For Release 2000/09/01 : CIA-RDP81B00879R000100170019-7

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_

(Payee)

PAID BY

DPS 0531  
COPY 1 OF 2

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)  Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				9,985.	61
Use continuation sheet(s) if necessary							
						9,985.	61

## PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total 9,985.61

I certify that the above bill is correct and just and that payment has not been received.

STATINTL (Sign original only)

Date 5/9/58 \*Payee \_\_\_\_\_  
(required when a like certificate is made by payee on attached bill or bill)

(Payee must NOT use this space)

Differences \_\_\_\_\_

Amount verified; correct for \_\_\_\_\_  
(Signature or initials)

Per \_\_\_\_\_

Title \_\_\_\_\_

Contract No. \_\_\_\_\_ Date \_\_\_\_\_ Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ \_\_\_\_\_

† \_\_\_\_\_  
(Authorized Certifying Officer)

By \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ (on Treasurer of the United States in favor of payee named above.)  
Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_ Payee \_\_\_\_\_  
(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe, Secretary, ABC Company, Inc." If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

Per \_\_\_\_\_

Title \_\_\_\_\_

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METHOD OF OR ABSENCE OF ADVERTISING

METHOD OF ADVERTISING

1. Advertising in newspapers Yes ☐ No ☐.
2. (a) Advertising by circular letters sent to ..... dealers.  
(b) And by notices posted in public places Yes ☐ No ☐.

(If notices were not posted in addition to advertising by circular letters sent to dealers, explanation of such omission must be made below.)

ABSENCE OF ADVERTISING

3. Without advertising, under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.
4. Without advertising in accordance with .....
5. Without advertising, it being impracticable to secure competition because of .....

(Here state in detail the nature of the exigency or circumstances under which the securing of competition was impracticable under 3 and 4)

NOTE.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under proper authority without written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or less formal agreement) Standard Form No. 1036—Revised should be used for abstracting the method of or absence of advertising and award of contract. (See General Regulations No. 51, as amended.)

**STATINTL**

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4/30/58

BATCH				INVOICE	PURCHASE	CHECK	PAYMENT		Vendor	GROSS	DISCOUNT	Tax Class	Cost Element	TR.	COST CENTER			CHARGE DISTRIBUTION				NET AMOUNT
No.	Mo.	Day	Yr.	NUMBER	ORDER	NUMBER	Mo.	Day	Number	AMOUNT					Maj.	Int.	Sub.	Account	M.J.O.	S.D.	Work Order	
41	04	30	8	1901	44659		05	02	1568					50	25	27	20	12501	5048	03	2	21718 21718 * 21718 **
<i>Continued to Sheet #2</i>																						

Continued to Sheet #2

4/30/58

$$\begin{array}{r} 2350 \\ 2350 \quad * \\ 2350 \quad ** \\ \hline 24068 \quad *** \end{array}$$

Continued to Sheet # 5

Sheet # 3

4/30/58

[illegible]

Continued to Sheet # 4

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Sheet # 4

4/30/58

BATCH				INVOICE	PURCHASE	CHECK	PAYMENT		Vender	GROSS	DISCOUNT	Tax	Cross	Check	Element	TR	COST CENTER			CHARGE DISTRIBUTION				NET AMOUNT	
No.	Mo.	Day	Yr.	NUMBER	ORDER	NUMBER	Mo.	Day	Number	AMOUNT						Code	Maj.	Int.	Sub.	Account	M.J.O.	S.D.	Work Order		
11	04	30	8	20		8652	04	30	352							55	25	40	00	12501	5049	09	1		300 300 * 300 **
Continued to Sheet #5																									

Continued to Shu #5

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*Sheet #5*

THE RAMO-WOOLDRIDGE CORPORATION

# ACCOUNTS PAYABLE

WEEKLY DET DISTR

DATE

4/30/58

FORM STL - 660

BATCH				INVOICE	PURCHASE	CHECK	PAYMENT	Vendor	GROSS	DISCOUNT	Tax	Cost	TR	COST CENTER			CHARGE DISTRIBUTION				NET AMOUNT
No.	Mo.	Day	Yr.	NUMBER	ORDER	NUMBER	Mo.	Day	AMOUNT		Code	Element	Code	Maj.	Int.	Sub.	Account	M.J.O.	S.D.	Work Order	
11	04	30	8	20		8652	04	30					55	25	40	00	12501	5049	90	1	780
41	04	30	8	C-2896	44418		05	09	266				50	25	40	00	12501	5049	90	1	6000
																					6780 *
																					6780 **
																					7880 ***
																					<i>Sheet #2</i>
																					<i>240.68</i>
																					<i>319.48</i>
																					<i>Total</i>

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May 9, 1958

STATINTL

The following is an itemized listing of public vouchers under Contract [REDACTED] which are unpaid as of this date.

<u>Voucher No.</u>	<u>Period Covered</u>	<u>Date Mailed</u>	<u>Amount</u>
22	3/2 - 4/27/58	5/2/58	\$ 159,714.90
23	W/E 5/4/58	5/9/58	<u>9,985.61</u>
		TOTAL	<u>\$ 169,700.51</u>